2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # S54727

1. Entity Name
DON STINE PETROLEUM, INC.

Principal Place of Business	Mailing Address
2509 TURKEY CREEK ROAD PLANT CITY, FL 33567	2509 TURKEY CREEK ROAD PLANT CITY, FL 33567

DO NOT WRITE IN THIS SPACE

04212004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3069286	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STINE, DONALD K
2509 TURKEY CREEK ROAD
PLANT CITY, FL 33567

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

00000131890
04/27/04-80025-015 150.00

10.	OFFICERS AND DIRECTORS
TITLE	DP
NAME	STINE, DONALD K
STREET ADDRESS	2812 JOHN MOORE RD
CITY-ST-ZIP	BRANDON, FL
TITLE	DV
NAME	HOLLIS, JOEL C.
STREET ADDRESS	1341 LONGOAK LOOP N.
CITY-ST-ZIP	LAKELAND, FL
TITLE	DST
NAME	STINE, MARY LIB
STREET ADDRESS	2812 JOHN MOORE RD.
CITY-ST-ZIP	BRANDON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____   4-22-04   813-752-9119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #